

Public Document Pack

Tony Kershaw
Director of Law and Assurance

If calling please ask for:

Adam Chisnall on 033 022 28314
Email: adam.chisnall@westsussex.gov.uk

www.westsussex.gov.uk

County Hall
Chichester
West Sussex
PO19 1RQ
Switchboard
Tel no (01243) 777100



24 November 2023

Dear Member,

Regulation, Audit and Accounts Committee - Friday, 1 December 2023

Please find enclosed the following documents for consideration at the meeting of the Regulation, Audit and Accounts Committee on Friday, 1 December 2023 which were unavailable when the agenda was published.

| Agenda No | Item |
|------------------|-------------|
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|-----------|---|
| 7. | Quarterly Review of Corporate Risk Management (Pages 3 - 18) |
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The report was late as the information was still being finalised at the time of the main agenda publication.

Yours sincerely

Tony Kershaw
Director of Law and Assurance

To all members of the Regulation, Audit and Accounts Committee

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**Key decision: Not applicable
Unrestricted**

Report to Regulation, Audit and Accounts Committee

1 December 2023

Quarterly Review of Corporate Risk Management

Report by Director of Finance and Support Services

Summary

This Committee has responsibility for oversight of the Council's risk management arrangements.

The risk of governance systems not being used fully and to best effect has reduced in significance due to the effectiveness/completion of mitigating actions.

Internal Audit recently conducted a review of Risk Management to seek assurances on the embeddedness of the risk management strategy and associated processes. The County Council were found to be 'Reasonable.'

Recommendation

The Committee is asked to review the information detailed in the report and provide comment, as necessary.

Quarterly update

1 Introduction

- 1.1 The Committee has responsibility to monitor the effectiveness of risk management arrangements. That role, together with a description of the Council's approach to risk management, is set out in the Constitution at Part 4 Section 4. It covers the allocation of responsibilities, including the quarterly review of risk management activity.

2 Background and context

- 2.1 Since the previous consideration by the Regulation, Audit and Accounts Committee (RAAC) on 14 July 2023 there have been the following changes to risks in the Corporate Risk Register (CRR). The full CRR is included in Appendix A.

| Risk No | Risk | Action | Reason | Current Score |
|----------------|---|-------------------------------------|--|----------------------|
| CR7 | Governance systems not used fully and to best effect. | Risk severity reduced and tolerated | Due to completion and development of mitigating actions. | 4 |

2.2 The following table summarises risks on the CRR with the current severity graded above the tolerance threshold. Full details of the mitigations in place are set out in the accompanying CRR.

| Risk No | Risk | Summary of Mitigations | Score - Prev Qtr | Score |
|----------------|-----------------------------------|--|-------------------------|--------------|
| CR11 | Recruitment and retention | Development of strategic workforce plan, including a consideration of alternative arrangements to address hard to fill posts and salary benchmarking across neighbouring LA's. | 25 | 25 |
| CR39a | Cyber-security | Conduction of penetration tests, disaster recovery and social engineering exercises. IT service redesign to ensure capacity & capability. | 25 | 25 |
| CR22 | Financial sustainability | Regular monitoring/reviews of financial position and reserves. Robust and regular financial planning sessions with ELT, Cabinet and Finance Teams. Lobbying for fairer funding for LA's. | 20 | 20 |
| CR58 | Failure of social care provisions | Monitoring of care home financial sustainability, including reviews of capacity and fees paid to providers. | 20 | 20 |

3 New Risks

3.1 No new risks have been added to the CRR during this reporting period.

4 Risk de-escalation or closure

4.1 There have been no risks either de-escalated or closed during this reporting period.

5 Risk Management Framework

5.1 The CRR continues to be reviewed quarterly by ELT, with any actions promptly addressed. In addition, risk is now considered as part of the quarterly ELT strategy sessions.

- 5.2 The directorate risk registers have been reviewed at least quarterly by each Director/Assistant Director and their management team, with support from the Corporate Risk Manager. The Corporate Risk Manager has continued to engage quarterly with Directorate leadership teams to discuss corporate and other directorate/service risks, and risk governance.
- 5.3 The quality of information contained in the corporate and directorate risk registers will continue to be reviewed and updated. The Corporate Risk Manager is continuing to challenge whether identified actions will sufficiently address the concerns, and within a suitable period.
- 5.4 Capital risks are managed through various project hubs and the Capital programme, all reporting to the Capital and Assets Board. The Board is chaired by the Director of Law and Assurance with other relevant ELT and senior officers in attendance and ensures that significant concerns to the successful delivery of the programme and/or capital projects are discussed, communicated to ELT, and reflected in the corporate risk register if required. The Corporate Risk Manager has continued to provide support to projects and programmes, and their risk registers.
- 5.5 Risk Management Lunch 'n' Learn sessions are being delivered as an online seminar every 2 months. The follow-on course (Risk Management in Practice) is being designed for face-to-face delivery using a combination of instruction via PowerPoint and syndicate/group work and will involve staff working through the County Council's risk management process using a generic scenario. Both formats of this course are available for staff in Districts and Boroughs, and other partnering organisations, at zero cost. To support staff in better managing their risks the Corporate Risk Manager has produced a variety of resources, which have been communicated to all staff and added to the County Council's Risk Management SharePoint site.
- 5.6 At this stage, there will be no additional resources required to facilitate the embedding/management of risk and future actions because current support within the organisation is sufficient. The Corporate Risk Manager is conducting risk workshops and risk training sessions in existing management meetings or during lunchtimes where possible to mitigate resource and scheduling conflicts. The 'Risk Management in Practice' course will take place during working hours, and participants will be responsible for ensuring their attendance doesn't significantly impact their role requirement.

6 Internal Audit Review

- 6.1 Internal Audit recently conducted a review of risk management to seek assurances on the embeddedness of the risk management strategy and associated processes. The County Council were found to be of a 'Reasonable' level of assurance. The table below summarises their observations, officer actions, and the current status.

| Observation/Risk | Action | Action Target Date | Status |
|---|---|---------------------------|---|
| Council officers may not possess sufficient knowledge to ensure they can competently perform duties in relation to risk management, affecting the effectiveness of the Council's risk management process. | Introduction to Risk Management course will be removed from the Managers Induction Pathway and be included on the All-Staff Induction Pathway. | 31 Mar 2024 | This will take place as part of the next review of induction training. The Risk Management Lunch n Learn course will continue for staff refreshers. |
| Council officers may not possess sufficient knowledge to ensure they can competently perform duties in relation to risk management, affecting the effectiveness of the Council's risk management process. | In preparation for action above, a full review of the Introduction to Risk Management course will be conducted to ensure that it is suitable for all staff. | 31 Dec 2023 | Complete |
| Risks that require mitigating to an acceptable level are tolerated exposing the authority to higher levels of risk. | All risks to be reviewed to confirm they have been assigned the appropriate risk response strategy. | 31 Aug 2023 | Complete - but will be subject to regular review as part of quarterly discussions with services. |
| Risk actions specified as ongoing - Risks continue unabated and not reduced by the proposed mitigations in a reasonable period, exposing the authority to risks for longer than necessary. | Regular communication and review of these risks at the appropriate level ensure that actions remain effective and appropriate in addressing the risk. These "ongoing" actions will continue to be reviewed and assessed as frequently and robustly as those with specific completion targets. | 31 Aug 2023 | Complete - but will be subject to regular review as part of quarterly discussions with services. |

7 Risk Activities

7.1 Significant activities the Corporate Risk Manager has been undertaking to support continuous improvement and alignment with best practice include:

- Quarterly attendance at ELT Strategy sessions
- Quarterly attendance at all directorate management team meetings to review existing corporate and service level risks, including horizon scanning discussions to identify additional concerns
- Provision of risk management support to Assistant Directors and Heads of Service
- Support to projects and programmes to provide assurance and support on robust governance, most notably Ash Dieback and Solar Photovoltaics (PV) and Battery Storage
- Inclusion of risks into the business planning process
- Increased collaboration with Internal Audit to ensure the risk management framework remains robust and aligned with best practice, and to support discussions and outcomes of ELT risk strategy sessions
- Design and delivery of an internal project management course (apprenticeship pathway) to ensure risk is considered during project delivery
- Support to the Southeast Risk Managers Group to share best practice of risk management across various local authorities

8 Recommendations

8.1 The committee is asked to consider the information in this report and provide comment, as necessary.

9 Risk implications and mitigations

9.1 The subject of the report is the corporate risk register. It would be contrary to the interests of the Council not to ensure that its risk management processes and registers were not aligned to Risk Management Strategy.

10 Policy alignment and compliance

10.1 Equality duty and human rights assessment. An Equality Impact Report is not required for this decision as it is a report dealing with internal and procedural matters only, although the Council's responsibilities in relation to the public sector equality duty will be one element of the approach to risk management.

Taryn Eves

Director of Finance and Support Services

Contact Officer: Fraser Pake, Corporate Risk and Business Planning Manager, 033 022 28246, fraser.pake@westsussex.gov.uk

Appendices

Appendix A – Corporate Risk Register

Background papers

None

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| Risk No | Risk Description | Risk Owner | Risk Impact | Date Risk Raised | Initial Risk | | | Risk Strategy | Target Risk | | | Risk Control/Action | Action Owner | Action Target Date | Risk Update | Current Risk | | | Next Risk Review Date | |
|---------|---|-----------------------------|--|------------------|--------------|------------|-------|---------------|-------------|------------|-------|---|-----------------------------|--------------------|---|--------------|------------|-------|-----------------------|--|
| | | | | | Impact | Likelihood | Score | | Impact | Likelihood | Score | | | | | Impact | Likelihood | Score | | |
| CR7 | There are governance systems which are not used fully and to best effect, and some which do not fit well together. This inhibits effective performance and delivery and frustrates those involved. Skills and knowledge of systems are patchy and excessive effort required for sound decisions and outcomes. | Director of Law & Assurance | 1. Delayed or incomplete governance for decisions impede service delivery. | Dec-19 | 4 | 4 | 16 | Tolerate | 2 | 2 | 4 | Examples of non-compliance used to inform Directors to enforce compliance with standards. | Director of Law & Assurance | Ongoing | AGS actions finalised November 2022 completed. AGS to RAAC in Dec 23. | 2 | 2 | 4 | Feb-24 | |
| | | | 2. Service improvement effort impeded. | | | | | | | | | Regular monitoring and active corporate support to establish better practice. | | | | | | | | Audit plan settled and activity in progress - specific work on governance of officer interests for new AGS & Director Statements of Assurance (completed July 2023). |
| | | | 3. Resources misapplied - poor VFM. | | | | | | | | | Audit plan focussing reviews on key corporate support systems to identify areas in need of improvement. | | | | | | | | Actions completed or in train as per agreed audit plan and specific audit projects |
| | | | 4. External criticism through audit | | | | | | | | | Training focused on CMT and senior officers involved in decision governance. | | | | | | | | Training rolled out to CMT and programme planned as continuous focused at relevant officers. |

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| CR11 | As a result of skill shortages across various sectors, and less attractive employment offers in comparison to other organisations and locations (amplified by the current cost of living situation), there is a risk that we will not be able to recruit and retain sufficient numbers of qualified/experienced staff to manage and deliver quality services. | Director of Human Resources & Org Dev | 1. Over-reliance on interim and agency staff. | Mar-17 | 4 | 5 | 20 | Treat | 4 | 2 | 8 | Development of strategic workforce planning approach in collaboration with services, to identify cross organisational skills, capacity and capability risks and requirements (current and future) and work with services to establish action plan for high risk and priority areas and roles. | Head of HR Bus Ptr & Org Dev | Dec-23 | <ul style="list-style-type: none"> Establish a WSCC-wide workforce plan identifying key priorities and challenges to be addressed over the next 5 years. Use audit findings to inform improvement of workforce planning methodology. Establish and maintain long term workforce action plans for identified priorities for recruitment and retention intervention. Identify priority professions and/or posts where succession planning could be impactful in addressing recruitment and retention challenges. | 5 | 5 | 25 | Feb-24 |
| | | | 2. Lack of corporate memory. | | | | | | | Developing alternative arrangements to attract candidates for hard to recruit to roles including the use of specialist third party search agencies. | Director of Human Resources & Org Dev/ Deputy Director HR&OD | ongoing | RPO contracted completed, business case delivered and work transitioned back inhouse. Contract with 3rd party for Property and Assets not delivering, activity transitioned back in house. Working with STEM returners as additional sourcing route for engineering roles in Place. Direct sourcing also underway. | | | | | | |
| | | | 3. Inadequate pace/speed of delivery. | | | | | | | Development and regular communication of comprehensive employee value proposition to support recruitment and retention. | Deputy Director of HR & OD | Jan-24 | Part of People Framework Action Plan. Updated context on website on 5 key areas of EVP, namely working environment, culture, financial benefits, career progression and learning and development. Recruitment & retention conversations taking place at Smarter Working Stakeholder Group to inform and support decision making. Ongoing social media activity around EVP, currently focussing on working environment and celebrating our Living our Values awards. Workshop planned post summer holidays to further develop an action plan. Being progressed as part of Careers and Skills TFG Action Plan. | | | | | | |
| | | | 4. Low staff morale and performance. | | | | | | | Longer term strategies for addressing recruitment issues e.g. apprenticeships, growing our own. | Deputy Director of HR & OD | Ongoing | 3 year plans in place for apprenticeships (currently being refreshed). LGA consultancy engaged with; recommendations received. Continuing programme of marketing and awareness raising, e.g. National Apprenticeships Week. Members Task and Finish Group (TFG) recommendations supported, next step will be to develop 4 year action plan. Performance and Finance Select Committee (PFSC) now receive quarterly HR and KPI data, which also includes key recruitment actions. Being progressed as part of Careers and Skills TFG Action Plan. | | | | | | |
| | | | 5. Unable to respond effectively to unexpected incidents. | | | | | | | Benchmarking of salaries against peers across neighbouring LA's focussed on attracting and retaining talent for key areas, and consider activates to address outcomes. | Head of Specialist HR Services | ongoing | Joint working with ESCC to benchmark across common priority roles with a view to sharing resource if commissioning deeper piece of work is needed. Initial benchmarking completed. Plan for a deep dive into selected roles to be planned. | | | | | | |
| | | | | | | | | | | Conduct planning session with HR team to review current recruitment practices, and meet with key stakeholders to develop comprehensive plan to address areas needing improvement. | Deputy Director of HR & OD | ongoing | Improvements in recruitment now being seen across the board, time to hire down to 78 days in Q1 (down from 92 in Q4). Capacity issues addressed in team. Further work needed around moving contract production into ATS. Payroll activity now transferred. RPO work transitioned back in house. Process improvements delivered. | | | | | | |
| | | | | | | | | | | Restructure of HR Resourcing function to ensure it better fits how recruitment now needs to be undertaken | Director of Human Resources & Org Dev | Apr-24 | Deputy Director HR&OD appointed and in post. | | | | | | |
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| CR22 | The financial sustainability of council services is at risk due to uncertain funding from central government and economic conditions (mainly inflation and interest rates) impacting on service delivery, and/or failure to make the required decisions to ensure the budget is balanced. This has been compounded further with the COVID-19 pandemic and the now cost of living crisis which is making economic conditions uncertain, and impacting on the cost of council services and demand for services. | Director of Finance & Support Services | 1. Insufficient government funding to deliver services and the impact of changes in the funding formula and Levelling Up Agenda in the medium term. | Mar-17 | 4 | 4 | 16 | Treat | 4 | 3 | 12 | Monthly monitoring of the financial position reported to ELT in addition to a separate report on Children's and Adults to consider mitigations for growing pressures and costs and progress against the delivery of savings. Monthly update to Cabinet Member for Finance and Property and Leader. | Director of Finance & Support Services | ongoing | | | | 4 | 5 | 20 | Jan-24 |
| | | | 2. Adverse effect on reserves/balanced budget. | | | | | | | | | Annual review of reserves undertaken to ensure they remain at a prudent level but can be used for one off unexpected spend. All use of risk and uncertainty reserves are assumed to be replenished and assumed within the MTFS position. Monitor the use of additional funds made available to improve service delivery. | | | | | | | | | |
| | | | 3. Reputational impact through reduction of service quality | | | | | | | | | Financial Planning sessions with ELT and Cabinet taking place to ensure officers and Members understand and own the financial challenge. | | | | | | | | | |
| | | | 4. Increased liability of service delivery, transferred by external partners due to funding restrictions i.e. supporting homelessness. | | | | | | | | | Publication of annual MTFS (Revenue and Capital) across a five year planning period aligned to the Council Plan. A balanced budget for 2024/25 is expected but with a budget gap of £140m for the period 2025/26 to 2028/29, long term planning is critical and will commence Autumn 2023. | | | | | | | | | |
| | | | 5. Additional unexpected service and cost pressures from savings decisions. | | | | | | | | | Continue to lobby for fairer funding for Local Government through, fiscal announcements. Lobbying as individual County Council, part of the SE7 Group, SCT and CCN. Responses provided to all relevant Government consultations on changes to ensure the Voice of West Sussex is heard. | | | | | | | | | |
| | | | 6. Financial implications from the long term recovery of the Covid-19 pandemic, Cost of Living Crisis and volatile economic conditions. Particularly impacting on social care, energy prices and cost of construction for the capital programme. | | | | | | | | | Annual review of progress against the 17 standards in the FM code, ownership by ELT and Cabinet. Annual action plan in place and monitored for continuous improvement. | | | | | | | | | |
| | | | Impact of new legislation and requirements which are not fully funded and require additional council resources for delivery. | | | | | | | | | | | | | | | | | | |
| | | | Statutory over rides relating to pooled investments and the DSG deficit ending in 2025/26 with no long term solution to address the financial implications on the County Council. | | | | | | | | | | | | | | | | | | |
| | | | Increased demand and cost of services - budget is set based on a set of assumptions and the latest information available. As demand and costs continue to increase, particularly in social care, there is a risk that these assumptions are not correct resulting in an overspend that required funding through use of contingency or reserves. | | | | | | | | | | | | | | | | | | |
| | | | Non delivery of in year savings resulting in an overspend that will need to be funded either through use of corporate contingency or reserves. | | | | | | | | | | | | | | | | | | |

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| | | | | | Impact | Likelihood | Score | | Impact | Likelihood | Score | | | | | Impact | Likelihood | Score | | | |
| CR39a | Cyber threat is an evolving, persistent and increasingly complex risk to the ongoing operation of County Council. There is a risk of a successful cyber attack directly from external threats; or indirectly as a consequence of members or staff falling prey to social engineering or phishing attacks. The potential outcome may lead to significant service disruption and possible data loss. | Director of Finance & Support Services | 1. The Council suffers significant financial loss or cost. | Mar-17 | 4 | 5 | 20 | Treat | 4 | 4 | 16 | Regular review, measurement and evaluation of corporate (technological/process) / organisational (behavioural) response to current and emerging cyber threats, where applicable to undertake pertinent actions to mitigate risks identified. | Head of IT | Ongoing | | 5 | 5 | 25 | Jan-24 | | |
| | | | 2. The Council's reputation is damaged. | | | | | | | | | Improve staff awareness of personal & business information security practices & identification of cyber-security issues. Continued actions due to evolving threats. | | | Head of IT | | | | | Ongoing | Regular comms distributed to all staff. Continuing to drive employees to undertake mandatory annual Information Security and Data Protection education and certification. Ad hoc actions taken (as appropriate) in response to level of cyber threat. |
| | | | 3. Resident's trust in the Council is undermined. | | | | | | | | | Maintain IG Toolkit (NHS) & Public Service Network security accreditations. | | | Head of IT | | | | | Ongoing | Ongoing works to ensure appropriate connectivity/accreditation for applicable public sector/government networks/system connectivity. |
| | | | 4. Partners will not share data or information with the Council. | | | | | | | | | Conduct tests including penetration, DR and social engineering. (conducted 6 monthly) | | | Head of IT | | | | | Ongoing | Ongoing works to ensure appropriate connectivity/accreditation for applicable public sector/government networks/system connectivity. |
| | | | 5. Punitive penalties are made on the Council. | | | | | | | | | Ensure that cyber-attack is identified early, that reporting & monitoring is effective, and recovery can be prompt. | | | Head of IT | | | | | Ongoing | 2023 testing schedule complete, preliminary plans for 2024 being drawn up. |
| | | | | | | | | | | | | Provide capacity & capability to align with National Cyber-Security centre recommendations. | | | Head of IT | | | | | Ongoing | Training needs assessment regularly undertaken, programme of education developed to ensure IS resources are appropriately skilled and corporate practices followed align to NCSC guidance's. |

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| | | | | | Impact | Likelihood | Score | | Impact | Likelihood | Score | | | | | Impact | Likelihood | Score | | | |
| CR39b | Data protection responsibilities. The Council is a Data Controller and has obligations and responsibilities arising from that role. Council needs resources, skills, knowledge, systems and procedures to ensure obligations are met. | Director of Law & Assurance | 1. Individuals or groups come to harm. | Mar-17 | 4 | 5 | 20 | Tolerate | 3 | 3 | 9 | Test the effectiveness of DPIA | Head of Data Protection | Ongoing | Annual business process review via DPIA to confirm compliance or to reflect update/risk assessment if business process elements have shifted since last review. | 3 | 3 | 9 | Feb-24 | | |
| | | | 2. The Council's reputation is damaged. | | | | | | | | | Maintain IG Toolkit (NHS) & Public Service Network security accreditations. | | | Head of IT | | | | | Ongoing | Ongoing works to ensure appropriate connectivity/accreditation for applicable public sector/government networks/system connectivity. DPT has this task which is completed in March every year: March 2022 WSCC met expectations. Remainder is ongoing |
| | | | 3. Resident's trust in the Council is undermined. | | | | | | | | | Secure additional capacity for data protection team to further reduce risk of non-compliance with statutory deadlines. | | | Director of Law & Assurance | | | | | Jan-24 | Business case produced. |
| | | | 4. Partners will not share data or information with the Council. | | | | | | | | | Enable safe data sharing, including using appropriate data standards & appropriate anonymization techniques. | | | Head of IT | | | | | Ongoing | Mandatory training implemented to ensure employees are aware of obligations and support available. Data sharing agreements / contractual terms to cover provision of effectively managed DP obligations between WSCC/Suppliers/third parties. |
| | | | 5. Punitive penalties are made on the Council. | | | | | | | | | Maintain and refresh systems of control to ensure that access to sensitive data and information is controlled. | | | Director of Law & Assurance | | | | | Ongoing | To refresh training of officers and members and maintain controls over actions to prevent and deal with data breaches. |
| | | | | | | | | | | | | Adopt ISO27001 (Information Security Management) aligned process & practices. | | | Head of IT | | | | | Ongoing | Adoption of ISO27001 is being considered as part of a wider assurance framework being developed to support operation of the Council's transformed internal IT function subsequent to the recent exit of the IT outsource. |
| | | | | | | | | | | | | Review IT systems implemented prior to 25 May 2018 to confirm compliance with updated regulations. | | | Head of IT | | | | | Jun-24 | Significant progress has been made to either migrate, rationalise or decommission systems, increasing demand on the service and resource constraints mean that actions for a small number of systems on plan remain outstanding. It is anticipated that final actions to complete this task will be concluded in Q1 2024. |

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| | | | | | Impact | Likelihood | Score | | Impact | Likelihood | Score | | | | | Impact | Likelihood | Score | |
| CR50 | WSCC are responsible for ensuring the HS&W of its employees and residents/customers. If WSCC staff/services and maintained schools fail to comply with H&S statutory duties, responsibilities and processes (in accordance with WSCC governance arrangements), there is a risk that it will lead to a serious health, safety and wellbeing incident occurring . | Director of Human Resources & Org Dev | <p>1. Increase risk of harm to employees, public and contractors.</p> <p>2. Increase number of civil claims for injuries sustained in workplace accidents and incidents, and insurance premiums.</p> <p>3. Adverse reputational impact to Council and maintained school.</p> <p>4. Increase in staff absence.</p> <p>5. Criminal prosecution, and interest from the enforcing authorities (HSE).</p> | Mar-17 | 4 | 5 | 20 | Treat | 3 | 2 | 6 | <p>Purchase, develop and introduce an interactive online H&S service led audit tool.</p> <p>Incorporate HS&W information/performance measure onto new online audit tool.</p> <p>Regular engagement with services to ensure H&S responsibilities continue to be fully understood and embedded in BAU activities.</p> <p>Regular engagement with other LA's on best practice and lessons learned.</p> <p>H&S Reps Committee to receive assurance quarterly on the management of directorate H&S risks.</p> <p>Develop and introduce a more comprehensive risk profile approach and front line service based audits.</p> | Health and Safety Manager | Dec-23 | The Advanced New Technology (ANT) online auditing tool has been purchased. The schools inspection form will be created in the first instance. | 3 | 3 | 9 | Feb-24 |
| | | | | | | | | | | | | | | | | | | | |

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| | | | | | Impact | Likelihood | Score | | Impact | Likelihood | Score | | | | | Impact | Likelihood | Score | |
| CR58 | The care market, and in particular the Lifelong Services and Mental Health market is experiencing significant fragility. This is anticipated to be related to factors such as but not limited to cost pressures, changing requirements and expectations, and workforce challenges. There is a risk of failure of social care provision which will result in funded and self-funded residents of West Sussex being left without suitable care. | Director of Adults and Health | <p>1. Potential that people will come to harm and Council will be unable to ensure statutory safeguarding duty.</p> <p>2. CQC action against service provider which could lead to establishment closure at short notice</p> <p>3. Financial implication of cost of reprovision following closure of services.</p> <p>4. Reduced capacity in the market as a result of failure of provision.</p> <p>5. Delay for those residents who are Medically Ready to Discharge (MRD).</p> <p>6. Non-compliance with Care Act.</p> <p>7. Reputational impact. Public perception of the council being willing to accept poor standards of care. Low public confidence in social care.</p> <p>8. Adverse impact on Health and Social Care system.</p> | Sep-18 | 5 | 5 | 25 | Treat | 3 | 3 | 9 | <p>Continue to risk assess services against CQC criteria/requirements to manage impact on pipeline activity.</p> <p>Provision of regular support and communication to market providers to monitor financial sustainability.</p> <p>Financial analysis of high risk provision - due diligence checks.</p> <p>In the event of an incident, ensure the consistent implementation of Emergency Response Plans, including a full de-brief and lessons learned.</p> <p>Review capacity of residential and non-residential services to ensure service availability and to support identification of contingencies if needed.</p> <p>Annual review of fees paid to providers to support financial sustainability.</p> | <p>Head of Commissioning - LLS and MH</p> <p>Head of Commissioning</p> <p>Service Manager - OP Contracts</p> <p>Assistant Director (Operations)</p> <p>Head of Commissioning - Older People</p> <p>Heads of Commissioning - Older People and LLS/MH</p> | <p>ongoing</p> <p>ongoing</p> <p>ongoing</p> <p>ongoing</p> <p>ongoing</p> | <p>Regular meetings with partners focused on quality within the provider market. Regular communications to care homes through newsletters and forums. Face to face monitoring re-introduced. Contract rate annual uplifts published and communicated to all providers with message to contact the Council with concerns regarding financial stability in order that these can be managed with providers at an early stage to minimise impact.</p> <p>Working with strategic contracts to identify key providers for more regular financial checks.</p> <p>Emergency plans in place for residential services and Domiciliary Care provision. Continue to work with RET to ensure process is robust and reflects learning from incidences. Incident Management Team meetings in place to manage risks associated with Covid or other Infection Prevention incidences which are flexed according to need and incident prevalence.</p> <p>Use of the National Capacity tracker, and regular contact with registered residential care providers enquiring about vacancies. This enables information on capacity for the Combined Placement and Sourcing team to utilise to support placements. Reviewing the bed booking system to ensure robust information on vacancies in block contract provision. Information on numbers of packages and placements being sourced is updated regularly and issues with capacity which are escalated to the fortnightly Capacity Oversight Group meetings. In times of capacity shortages action plans are developed to support improvements. Ongoing partnership working with the Integrated Care Board regarding availability of capacity for people being discharged from hospital and development of plans to support hospital pressures.</p> <p>Fees paid to providers increased by an average of 9% for 2023/24. Fees sub-group has been established with provider reps to engage and support decision making for 24/25.</p> | 5 | 4 | 20 | Dec-23 |

| Risk No | Risk Description | Risk Owner | Risk Impact | Date Risk Raised | Initial Risk | | | Risk Strategy | Target Risk | | | Risk Control/Action | Action Owner | Action Target Date | Risk Update | Current Risk | | | Next Risk Review Date | |
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| CR61 | A 'serious incident' occurs resulting in the death or serious injury of a child where the Council is found to have failed in their duty to safeguard, prevent or protect the child from harm. | Director of Children, Young People and Learning | 1. The Council would have let children down and as a result our reputation and credibility would be significantly damaged. | Jun-19 | 5 | 5 | 25 | Tolerate | 5 | 2 | 10 | Implementation and monitoring of Continuous Practice Improvement Plan (CPIP). | Director of Children, Young People and Learning | ongoing | Undertook a 6 month post inspection review with the DfE. Positive feedback and awaiting final report from the DfE next month. A review of the CPIP has been undertaken and now focuses on all key service areas. The CPIP is reviewed monthly by DLT and external scrutiny remains from the Continuous Improvement Board. | 5 | 2 | 10 | Feb-24 | |
| | | | 2. Subject to investigation and further legal action taken against the Council. | | | | | | | | | Provide proactive improvement support to services to assure effective safeguarding practices. | | | Director of Children, Young People and Learning | | | | | Programme of improvement actions continues in areas of the service where performance is not strong. The 6 month post ILACS review by the DfE completed and awaiting final report in November 2023. |
| | | | 3. Immediate inspection and Government intervention. | | | | | | | | | | | | | | | | | |
| CR69 | Children's Services have now been moved out of special measures as a result of the recent Ofsted inspection, however ILACS have outlined areas that require further development. If the council stall in their efforts to implement the planned improvements, there is a risk that the service will fail to progress all areas to a 'good' rating within a suitable timeframe. | Director of Children, Young People and Learning | 1. A child is exposed to dangers which could cause harm. | Mar-20 | 5 | 5 | 25 | Treat | 5 | 1 | 5 | Deliver Children First Improvement Plan. | Senior Improvement Lead | ongoing | Plan has been reviewed and refreshed based on ILACS feedback. Plan will regularly monitored and reviewed by DLT and relevant scrutiny committee. | 5 | 2 | 10 | Feb-24 | |
| | | | 2. Significant reputational damage. | | | | | | | | | Continue to work with Hants CC as a partner in practice to improve the breadth of children's service. | | | Director of Children, Young People and Learning | | | | | The council is reviewing the current partnership arrangement to determine the requirement for ongoing engagement and support. |
| | | | 3. Reduced confidence by residents in the Councils ability to run children's services. | | | | | | | | | Implement the Children First Service transformation model | | | Assistant Director (Children First Transformation) | | | | | Family Safeguarding model redesign to ensure practice improvements are sustainable and embedded to provide a good level of service is now fully implemented and is meeting its milestones for implementation. |
| | | | 4. Legal implications through non-compliance or negligence. | | | | | | | | | | | | | | | | | |

| Risk No | Risk Description | Risk Owner | Risk Impact | Date Risk Raised | Initial Risk | | | Risk Strategy | Target Risk | | | Risk Control/Action | Action Owner | Action Target Date | Risk Update | Current Risk | | | Next Risk Review Date | | |
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| CR73a | <p>Climate Change Mitigation - If there is a failure to adequately prioritise, finance, resource and embed into BAU our efforts to decarbonise in alignment with the commitments made in the Council's Climate Change Strategy, there is a risk that there will be insufficient capacity and capability to fully deliver the necessary actions within the stated timeframes. This will lead to additional resource strain, higher demand on capital programmes and threaten organisational reputation.</p> | Director for Place Services | Loss of public confidence in stated Climate Change Strategy. | Jan-22 | 4 | 3 | 12 | Treat | 2 | 2 | 4 | Clear prioritisation of CC Strategy delivery within Our Council Plan | Director for Place Services | ongoing | | 4 | 3 | 12 | Feb-24 | | |
| Loss of credibility with Govt and Partners notably West Sussex districts & boroughs, South Downs National Park Authority, Environment Agency, Natural England & Southern Water. | | | Built into county-wide Business Planning and budgeting process | | | | | | | | | Director for Place Services | | | | | | | | ongoing | |
| Punitive penalties are made on the Council, or be liable for higher future carbon pricing / taxation to achieve carbon neutrality. | | | SMART programme of actions based on clear definitions and metrics | | | | | | | | | Director for Place Services | | | | | | | | ongoing | |
| Increased vulnerability to energy market volatility and high utility rates from failure to electrify and retrofit our assets (higher utility costs, higher uncertainty). | | | Align pipeline of projects for existing and future funding opportunities | | | | | | | | | Assistant Director (Environment and Public Protection) | | | | | | | | ongoing | Relevant Funding Opportunities for decarbonisation of built assets considered by the Carbon Reduction Programme Board accountable to the Climate Change Board. Further work required to ensure all parts of the organisation are working collaboratively to maximise success of funding bids in all related areas of climate change, decarbonisation and natural capital. Additionally we are taking all opportunities to lobby Government (and support others making the same point) for sustained, targeted funding rather than piecemeal competitive bidding processes. |
| Additional strain on existing resources and officer capacity, without adequate planning there will be a lack of people trained with the right "green" skills to move this work forward (P&A team needs engineers to complete work, without adequate planning there won't be capacity). | | | Recruitment and training policy to ensure all staff & elected members are suitably informed on climate change issues & that specialist skills are embedded through recruitment & training to enable delivery | | | | | | | | | Assistant Director (Environment and Public Protection) | | | | | | | | ongoing | Sustainability Team now fully staffed – Carbon Literacy Training now online for staff. |

| Risk No | Risk Description | Risk Owner | Risk Impact | Date Risk Raised | Initial Risk | | | Risk Strategy | Target Risk | | | Risk Control/Action | Action Owner | Action Target Date | Risk Update | Current Risk | | | Next Risk Review Date |
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| CR73b | Climate Change Adaptation -West Sussex faces the high risk of increasing impacts of climate change including extreme heat, severe storms, flooding and sea level rise, among others. Without proactive consideration of and preparation for these impacts, WSCC assets, service delivery and West Sussex residents are at increased risk of damage, disruption and injury. This will lead to protracted service disruptions, dangerous conditions and increased reliance on emergency services. In the longer term this could lead to displacement of residents and businesses in vulnerable, lower lying areas. | Director for Place Services | Negative impact on recruitment and retention of staff, and decline of productivity. | Jan-22 | 4 | 3 | 12 | Treat | 3 | 2 | 6 | Clear prioritisation of CC Strategy delivery within Our Council Plan | Director for Place Services | ongoing | | 4 | 3 | 12 | Feb-24 |
| | | | Increased resource, capacity, officer expertise and capital demand on WSCC services to respond. | | | | | | | | | Existing assets and service delivery made climate change resilient & future developments designed to be as low carbon & climate change resilient ☑ | Director for Place Services | ongoing | Consultation with sustainability team during planning phase to ensure decisions are made when considering climate change and using live data. | | | | |
| | | | Impact on public health and increased community vulnerability due to projected changes in temperature, precipitation and weather patterns. | | | | | | | | | Recruitment and training policy to ensure all staff & elected members are suitably informed on climate change issues & that specialist skills are embedded through recruitment & training to enable delivery | Assistant Director (Environment and Public Protection) | ongoing | Sustainability Team now fully staffed – Carbon Literacy Training now online for staff. | | | | |
| | | | Damage to, or accelerated deterioration of, infrastructure/assets due to increased temperatures, drought and wildfires (HEAT VULNERABILITY). | | | | | | | | | | | | | | | | |
| | | | Damage to, or accelerated deterioration of infrastructure/assets Impact on public safety due to increased flooding, new precipitation patterns, storm intensity and sea level rise (FLOOD VULNERABILITY). | | | | | | | | | | | | | | | | |
| | | | Negative disruptions on service delivery. | | | | | | | | | | | | | | | | |
| CR76 | Natural England issued a Position Statement on 14 September 2021 that affects all planning applications not granted before that date within the Sussex North Water Supply Zone. This has essentially halted all WSCC plans and projects in the water supply zone until water neutrality can be demonstrated. There are number of impacts on and, potentially, opportunities for WSCC arising. The principal corporate risk is that the council will be unable to provide sufficient school places in the water neutrality area. | Director of Place Services | 1. Failing to deliver statutory duties where required modifications trigger water neutrality. (i.e. schools/educational settings) | Jun-23 | 4 | 3 | 12 | Treat | 4 | 1 | 4 | Regular engagement with Local Planning Authorities. | Director of Place Services | ongoing | Local Planning Authorities affected by the Position Statement are producing a Water Neutrality Strategy (expected by end-2023) seeking to address water neutrality concerns over the longer-term (15 years). However, this is unlikely to resolve current issues for offsetting proposed development or for any future planning applications that are not addressed by local plans (e.g. proposals on unallocated sites). | 4 | 3 | 12 | Feb-24 |
| | | | 2. Negative reputational impact. | | | | | | | | | Produce centralised offsetting register that captures potential offsetting opportunities across WSCC estate. | Ass. Dir. (Property and Assets) | Dec-23 | Business case to capture requirements of asset survey activity. | | | | |
| | | | 3. Service improvement efforts impeded. | | | | | | | | | Resource a robust set of centralised controls and initiatives to ensure identified offsetting opportunities are supported and secured in legal agreements. | Ass. Dir. (Property and Assets) | Dec-23 | | | | | |
| | | | 4. Potential legal action against the council in the event of non-compliance with The Conservation of Habitats and Species Regulations 2017 and associated case law. | | | | | | | | | Resources made available to support offsetting activities. | Director of Place Services | ongoing | Funding linked to governance arrangements and outputs/outcomes of offsetting register, and to include ongoing monitoring responsibility. | | | | |
| | | | 5. Excessive costs due to duplication of effort/technologies. | | | | | | | | | Direct instruction and ongoing regular engagement with all schools (including academies) regarding entering into off-setting negotiations independently of WSCC. | Ass. Dir. (Education and Skills) | Dec-23 | | | | | |
| | | | 6. Excessive/disproportionate costs of implementing offsetting opportunities. | | | | | | | | | | | | | | | | |
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